

**eTable 1**Asthma control classification using the adult Asthma Call-Back Survey<sup>a</sup>

	Well controlled	Not well controlled	Very poorly controlled
Symptoms <sup>b</sup>	≤8 d in past 30 d	>8 d in past 30 d but not throughout the day	every day in past 30 d and throughout day
Nighttime awakenings <sup>c</sup>	≤2 times in past 30 d	≥3 and ≤12 times in past 30 d	≥13 times in past 30 d
Rescue medication <sup>d</sup>	≤0.29 uses/d	>0.29 and <2.00 uses/d	≥2.00 uses/d

<sup>a</sup>The asthma control level is based on the most severe impairment category.<sup>b</sup>Based on the response to the question: “During the past 30 days, on how many days did you have any symptoms of asthma?”<sup>c</sup>Based on the response to the question: “During the past 30 days, on how many days did symptoms of asthma make it difficult for you to stay asleep?”<sup>d</sup>Frequency of inhaler rescue medication (not nebulizer) uses per day or per week for all reported rescue medications taken in the previous 3 months was converted to the number of uses per day and summed. Excluded were rescue medications used only for treatment before exercise.